Users of Long-Term
Services and Supports (LTSS)
in California: 2005-2008

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Assembling Medi-Cal, Medicare and State Data Files

- Comprehensive statewide study of users of LTSS, including dual eligibles
- Assembling an integrated and longitudinal database of Medicaid, Medicare and state data (CYs 2005-2008)
 - 19 claims, assessment, eligibility and other files from CMS, Medi-Cal and other state departments
 - Does not include Part D prescribing data
 - 1.58 million study participants



Examples of Key Questions

- How much do LTSS beneficiaries cost to Medi-Cal and Medicare by service category: acute, post-acute, and LTSS?
- What are the characteristics and needs of beneficiaries of Medi-Cal's home and community-based services (HCBS)? What services do they use? What are their outcomes?
- What are the characteristics, needs, and service histories of Medi-Cal beneficiaries who are admitted to nursing facilities for long stays?

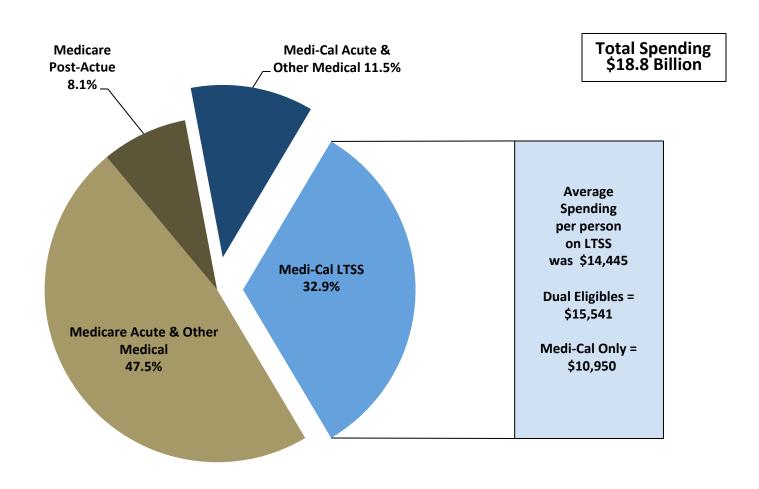


Study Population

- Persons age 18 and older
- Received Medi-Cal funded LTSS in 2008
 - Nursing Facility (NF)
 - Home Health (HH)
 - In-Home Supportive Services (IHSS)
 - Adult Day Health Care (ADHC)
 - Targeted Case Management (TCM)
 - Any section 1915(c) HCBS waiver
- Excluded populations
 - Individuals who qualify for Medi-Cal based on a diagnosis of developmental disability
 - Individuals enrolled in Medi-Cal or Medicare managed care

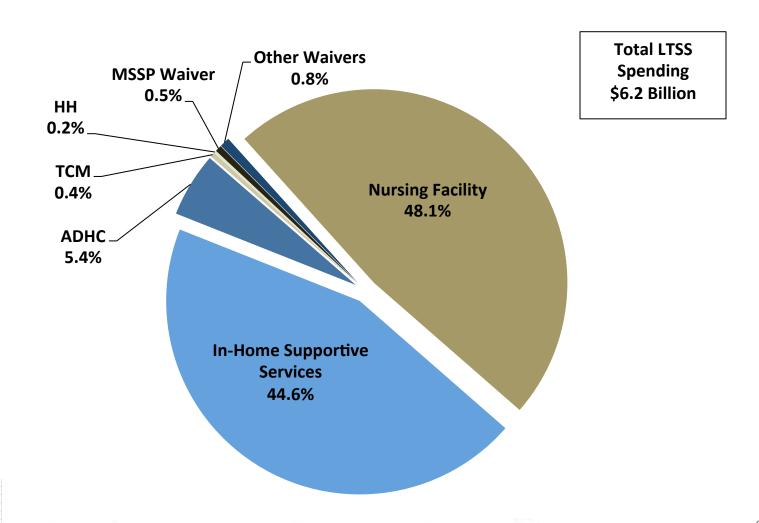


Medi-Cal and Medicare Spending for Acute and Other Medical, Post-Acute and LTSS, 2008



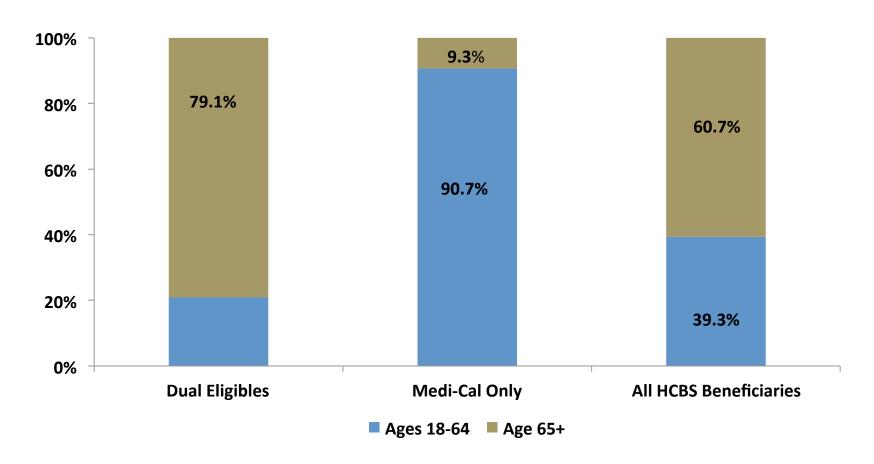


Medi-Cal Spending on LTSS, 2008





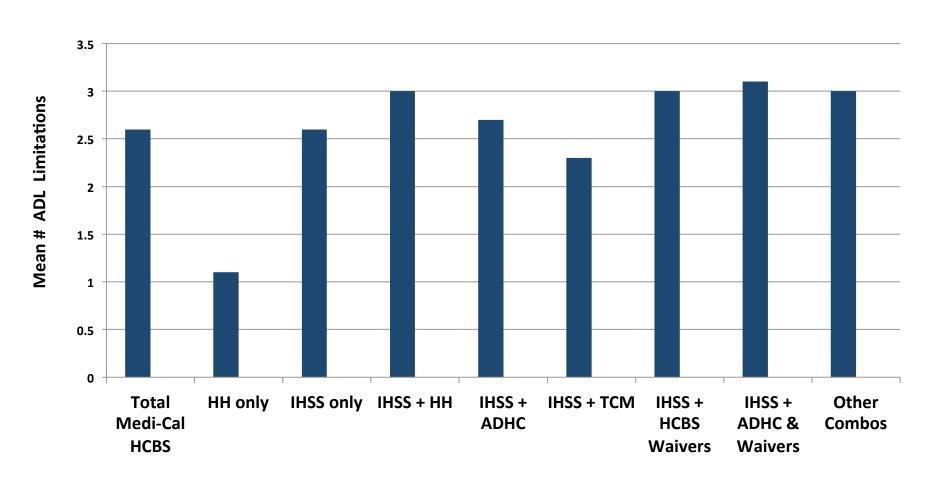
Mean Age of HCBS Recipients, 2008





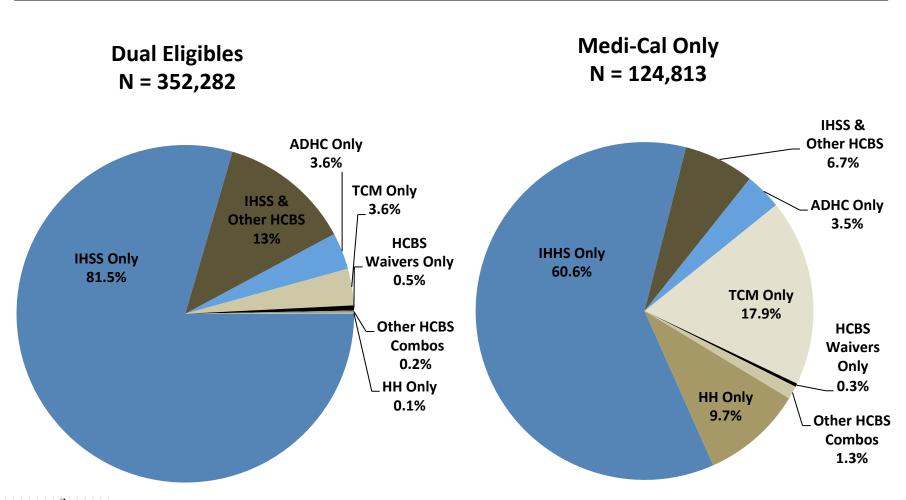
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Limitations in ADLs among HCBS Recipients, 2008



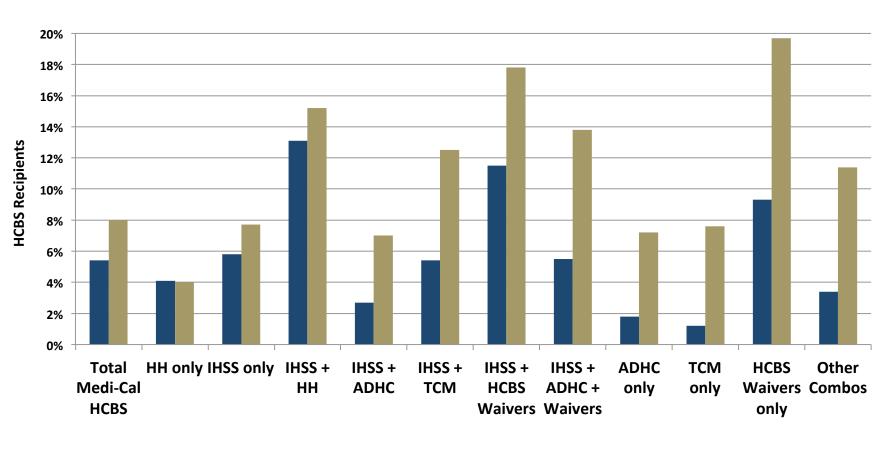


HCBS Recipients by Type of Service, 2008





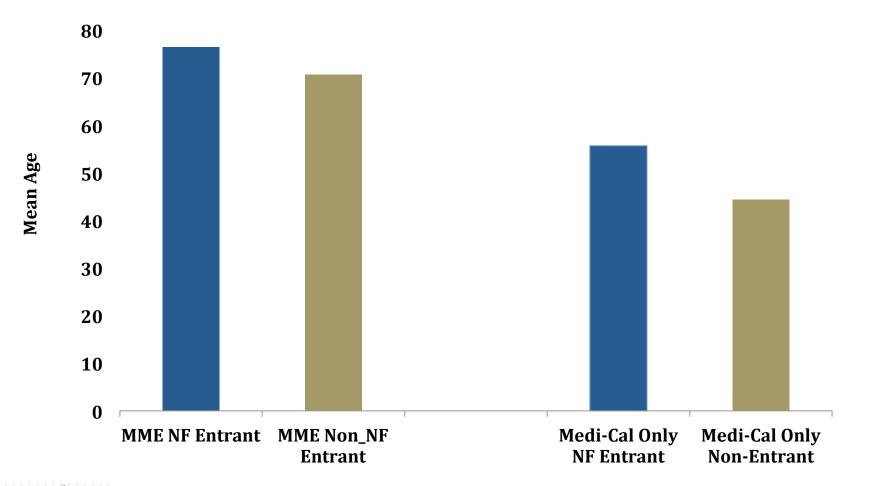
Mortality and Nursing Facility Admissions among HCBS Recipients





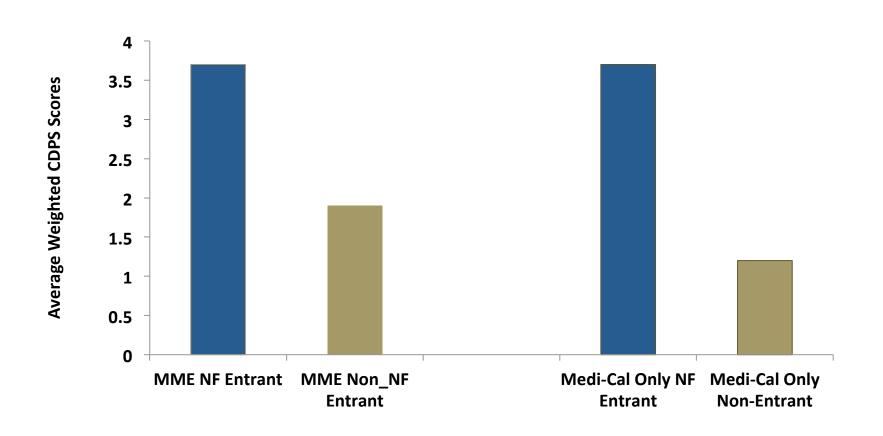


Mean Age of Dual and Medi-Cal Only Long-Stay NF Entrants Compared to Non-Entrants



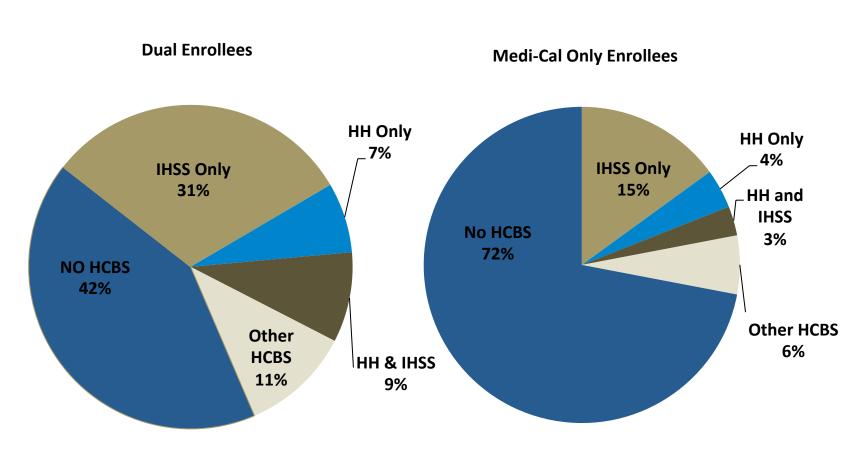


Average Weighted CDPS Scores for Duals and Medi-Cal Only Long-Stay NF Entrants and Non-Entrants



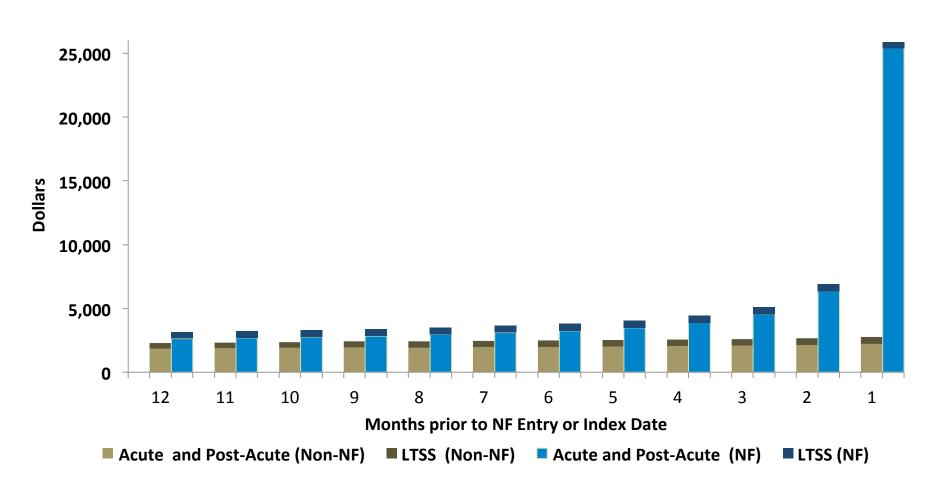


Use of HCBS by Duals and Medi-Cal Only Enrollees During 3 Months Prior to Long-Stay NF Entry



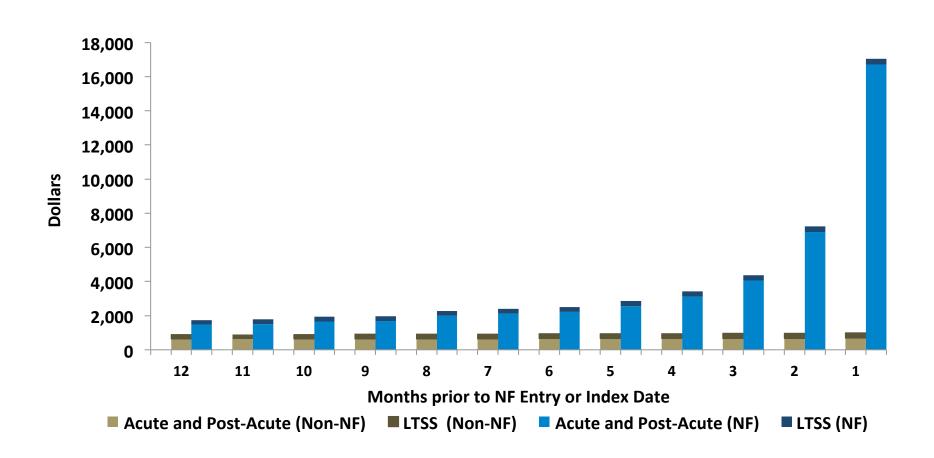


Average Medi-Cal and Medicare Expenditures for Dual Enrollees in 12 Months Prior to NF Admission



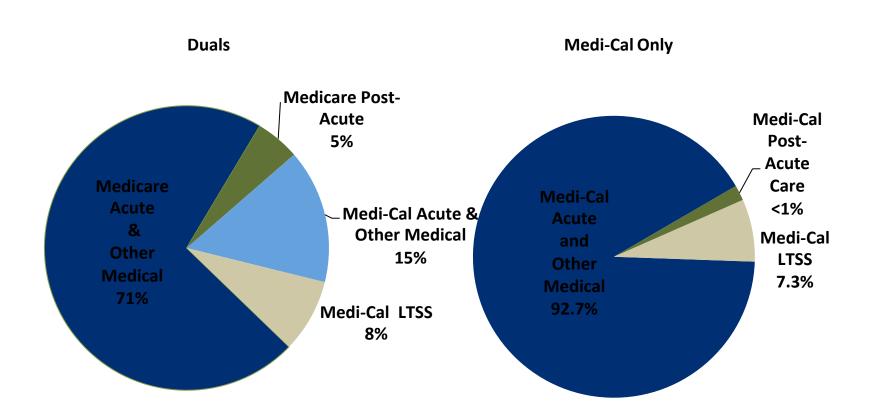


Average Medi-Cal Expenditures for Medi-Cal Only Enrollees in 12 Months Prior to NF Admission





Source of Expenditures during 12 Months Prior to Long-Stay NF Entry





Key Messages

- Just over half of Medi-Cal's LTSS delivered through HCBS yet there are signs of missed opportunities to reduce reliance on nursing facility care
- A large proportion of Medi-Cal beneficiaries did not receive HCBS prior to a nursing facility admission
- As currently constructed waivers play a very small role in expanding Medi-Cal's capacity to use HCBS to prevent long-stay nursing facility admissions



On-Going Work

- The cost trajectory of Medi-Cal beneficiaries before and after receipt of HCBS services
- The cost trajectory of Medi-Cal beneficiaries before and after long-stay nursing facility admissions
- County variation in the use, costs and outcomes of LTSS services



Unique Opportunity At Risk

- CAMRI has partnered with DHCS to develop methods to combine and analyze data on Medi-Cal's LTSS population
- Opportunity to build upon this work with updated data to enable monitoring of policies over time
- Requires commitment of DHCS to share data and financial resources to support the work



Acknowledgments

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The SCAN Foundation



Reports Available at

The SCAN Foundation http://thescanfoundation.org

CAMRI http://camri.universityofcalifornia.edu



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